# **United States Bankruptcy Court Eastern District of Wisconsin**

In re	Robert L. Beck, Jr.,		Case No	15-30615
	Dawn L. Beck		_	
_		Debtors	Chapter	7

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	14,713.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		2,574.67	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	12		122,977.96	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,588.63
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,629.00
Total Number of Sheets of ALL Schedu	ıles	26			
	To	otal Assets	14,713.00		
			Total Liabilities	125,552.63	

# **United States Bankruptcy Court**

Eastern	<b>District</b>	of Wisc	ncin
Lastern	DISHICL	01 44 120	OHSIII

In re	Robert L. Beck, Jr.,		Case No <b>15</b>	-30615	
	Dawn L. Beck				
-		Debtors	Chapter	7	

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	2,574.67
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	103,902.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	106,476.67

# State the following:

Average Income (from Schedule I, Line 12)	2,588.63
Average Expenses (from Schedule J, Line 22)	3,629.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	7,526.39

## State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	2,574.67	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		122,977.96
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		122,977.96

In re

Robert L. Beck, Jr., Dawn L. Beck

**Debtors** 

# **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Husband, Wife, Joint, or Community

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total >

0.00

(Total of this page)

Total >

0.00

In re Robert L. Beck, Jr., Dawn L. Beck

Case No	15-30615	

**Debtors** 

# SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on hand	С	20.00
2.	Checking, savings or other financial accounts, certificates of deposit, or	Checking account with Trustone Financial	С	736.00
	shares in banks, savings and loan, thrift, building and loan, and	Savings account with Trustone Finanical	С	68.00
	homestead associations, or credit unions, brokerage houses, or	Checking with TCF Bank	С	300.00
	cooperatives.	Savings with TCF Bank	С	25.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Various household goods and furnishings; no one particular item has an individual value of more than \$575	С	2,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Clothing and wearing apparel	С	300.00
7.	Furs and jewelry.	Assorted jewelry	С	1,000.00
8.	Firearms and sports, photographic, and other hobby equipment.	Assorted fishing equipment	С	400.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	Х		

Sub-Total >	4,849.00
(Total of this page)	

**2** continuation sheets attached to the Schedule of Personal Property

In re Robert L. Beck, Jr., Dawn L. Beck

Case No.	15-30615	

Debtors

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

			(		
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	х			
12.	Interests in IRA, ERISA, Keogh, or		401(k) through husband's employer	С	1,700.00
	other pension or profit sharing plans. Give particulars.		403(b) through wife's employer	С	150.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tota	al > 1,850.00
			T)	Cotal of this maga)	•

(Total of this page)

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

Robert L. Beck, Jr., In re Dawn L. Beck

Case No.	15-30615	

# Debtors

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	20	05 Chevrolet Equinox	С	4,459.00
	other vehicles and accessories.	20	04 Buick Lesabre	С	3,555.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total >

8,014.00

(Total of this page) Total >

14,713.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re

Robert L. Beck, Jr., Dawn L. Beck

Debtors

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:  $\square$  Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.) (Check one box) ■ 11 U.S.C. §522(b)(2)
□ 11 U.S.C. §522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on Hand Cash on hand	11 U.S.C. § 522(d)(5)	20.00	20.00
Checking, Savings, or Other Financial Accounts, Concher Financial	ertificates of Deposit 11 U.S.C. § 522(d)(5)	736.00	736.00
Savings account with Trustone Finanical	11 U.S.C. § 522(d)(5)	68.00	68.00
Checking with TCF Bank	11 U.S.C. § 522(d)(5)	300.00	300.00
Savings with TCF Bank	11 U.S.C. § 522(d)(5)	25.00	25.00
Household Goods and Furnishings Various household goods and furnishings; no one particular item has an individual value of more than \$575	11 U.S.C. § 522(d)(3)	2,000.00	2,000.00
Wearing Apparel Clothing and wearing apparel	11 U.S.C. § 522(d)(3)	300.00	300.00
Furs and Jewelry Assorted jewelry	11 U.S.C. § 522(d)(4)	1,000.00	1,000.00
<u>Firearms and Sports, Photographic and Other Hobl</u> Assorted fishing equipment	<u>by Equipment</u> 11 U.S.C. § 522(d)(3)	400.00	400.00
Interests in IRA, ERISA, Keogh, or Other Pension o 401(k) through husband's employer	r <u>Profit Sharing Plans</u> 11 U.S.C. § 522(d)(12)	1,700.00	1,700.00
403(b) through wife's employer	11 U.S.C. § 522(d)(12)	150.00	150.00
Automobiles, Trucks, Trailers, and Other Vehicles 2005 Chevrolet Equinox	11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5)	3,675.00 784.00	4,459.00
2004 Buick Lesabre	11 U.S.C. § 522(d)(2)	3,555.00	3,555.00

Total:	14.713.00	14.713.00

In re Robert L. Beck, Jr., Dawn L. Beck

Case No.	15-30615	

**Debtors** 

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors hold:	ıng	seci	ired ciainis to report on this Schedule D.					
CREDITOR'S NAME	000	l	sband, Wife, Joint, or Community	COZ	U N	DIC	AMOUNT OF CLAIM	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZF	LLQULDA	DISPUTED	WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.				Ť	Ť	Ī		
					D			
			Value \$					
Account No.	┢		varue φ		1	$\dashv$		
1100000101								
			Value \$					
Account No.								
	L		Value \$			_		
Account No.								
			XX.1. (1)					
	<u></u>	<u> </u>	Value \$	ubto	ot c	$\dashv$		
continuation sheets attached			S (Total of th			- 1		
			(2011) 32 11		ota	ı	0.00	
			(Report on Summary of Sci				0.00	0.00

In re

Robert L. Beck, Jr., Dawn L. Beck

Case No. <u>15-30615</u>	
--------------------------	--

Debtors

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled

"Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.  Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report thi total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busines whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Feder Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Robert L. Beck, Jr., In re Dawn L. Beck

Case No.	15-30615	
Case No.	13-30013	

Debtors

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

**Taxes and Certain Other Debts Owed to Governmental Units** 

							TYPE OF PRIORITY	·
CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C C D E B T C R	Н W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDA	ΙE	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY  AMOUNT ENTITLED TO PRIORITY
Account No.				٦	D A T E D			
IRS - Centralized Insolvency Operation Post Office Box 7346 Philadelphia, PA 19101-7346		c						0.00
							2,574.67	2,574.67
Account No.								
Account No.								
Account No.								
Account No.	T	T		$\dagger$	T			
Sheet <u>1</u> of <u>1</u> continuation sheets atta	ch.	ed to		Sub	<u>1</u> tota	l l		0.00
Schedule of Creditors Holding Unsecured Price				this	pag	ge)	2,574.67	2,574.67
			-		Γota			0.00
			(Report on Summary of S	che	dule	es)	2,574.67	2,574.67

In re	Robert L. Beck, Jr.
	Dawn L. Beck

Case No.	15-30615	

Debtors

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

						_		
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	CO	U N		2	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. xxx5533	DEBTOR	J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Opened 2/24/15	OZHIZGEZH	LIQUIDAT	SPUTED	S P U T E	AMOUNT OF CLAIM
					E D			
Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220		С	Medical services					555.00
Account No. xx8834		$\vdash$	Opened 6/17/13 Last Active 2/01/13	╀	$\vdash$	Ł	4	
Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220		С	Medical services					
								40.00
Account No. xxx834A			Opened 8/30/13 Last Active 4/01/13				T	
Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220		С	Medical services					
								40.00
Account No. xxx808A			Opened 3/19/13 Last Active 3/01/12				1	
Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220		С	Medical services					
								40.00
			(Total of t	Subi				675.00

n re	Robert L. Beck, Jr.,
	Dawn L. Beck

Case No.	15-30615	

CREDITOR'S NAME,	S	Hu	sband, Wife, Joint, or Community		C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C M H	DATE CLAIM WAS INCURRED ANI CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	IM	COZHLZGEZH	OM-IND-INZC	- 0 P U T II D	AMOUNT OF CLAIM
Account No. xx4144			Opened 3/19/13 Last Active 4/01/12		Т	T E		
Americollect Inc 1851 S Alverno Rd Manitowoc, WI 54220		С	Medical services			D		40.00
Account No.	┢	┢	Judgment Date: 7/7/2005			$\vdash$	Н	
Aurora Medical Group, Inc. 3000 W. Montana Street Milwaukee, WI 53215		С	Judgment Kenosha Co. Case No. 05-SC-1923					
								2,295.05
Account No. xxxx-xxxx-xxxx-8415			2015			Н		
Capital One Bank (USA), N.A. 4851 Cox Road Glen Allen, VA 23060		С	Credit card purchases					
								225.00
Account No. xxxxxxxx5711	ļ		Opened 1/10/15 Last Active 7/01/15					
Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238		С	Credit Card					
								862.00
Account No. xxxxxxxxxxxxxxxxxxxxXXXXXXXXXXXXXXXXX			Opened 1/26/11 Last Active 6/01/15					
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					21,923.00
Sheet no. <u>1</u> of <u>11</u> sheets attached to Schedule of			I.	S	uht	ota]	L l	
Creditors Holding Unsecured Nonpriority Claims			(To	otal of th				25,345.05

In re	Robert L. Beck, Jr.,
	Dawn I Beck

Case No.	<u> 15-30615</u>	

		_			_		1
CREDITOR'S NAME,		Hu	usband, Wife, Joint, or Community		U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	l Q	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxxxxx1017			Opened 10/17/11 Last Active 6/01/15		E		
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan		В		13,664.00
Account No. xxxxxxxxxxxxxxxxx0716	t	T	Opened 7/16/13 Last Active 6/01/15	T	T	T	
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan				
							8,800.00
Account No. xxxxxxxxxxxxxxxxx0407		T	Opened 4/07/10 Last Active 6/01/15		T	Т	
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan				
					ot		8,077.00
Account No. xxxxxxxxxxxxxxxxxx1207	ļ		Opened 12/07/10 Last Active 6/01/15				
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan				
							6,490.00
Account No. xxxxxxxxxxxxxxxxxx1105			Opened 11/05/12 Last Active 6/01/15				
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan				5,797.00
Sheet no. 2 of 11 sheets attached to Schedule of		•		Sub	tota	ıl	40 000 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	paş	ge)	42,828.00

In re	Robert L. Beck, Jr.
	Dawn I Beck

Case No.	<u> 15-30615</u>	
-		

					<b>—</b>		—	
CREDITOR'S NAME,		H	sband, Wife, Joint, or Community		2	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	- 1	CONTINGENT	UNLIQUIDATED	SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxxxxx1105			Opened 11/05/12 Last Active 6/01/15		Γ	E		
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan			D		4,636.00
Account No. xxxxxxxxxxxxxxxxxxxxx0308	t	T	Opened 3/08/12 Last Active 6/01/15	_	T	$\dashv$	П	
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					
					1			4,578.00
Account No. xxxxxxxxxxxxxxxxxx1207			Opened 12/07/10 Last Active 6/01/15		T	$\Box$	П	
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					4577.00
	_				$\downarrow$	_	Ц	4,577.00
Account No. xxxxxxxxxxxxxxxxxxxxxxx0407  Dept Of Ed/Navient Po Box 9635  Wilkes Barre, PA 18773		С	Opened 4/07/10 Last Active 6/01/15 Student loan					
					$\perp$		Ш	3,575.00
Account No. xxxxxxxxxxxxxxxxxxxxxx0629  Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Opened 6/29/13 Last Active 6/01/15 Student loan					3,412.00
Sheet no. 3 of 11 sheets attached to Schedule of				Su	bto	ota!	1	20,778.00
Creditors Holding Unsecured Nonpriority Claims			(Total	of thi	s p	ag	e)	20,770.00

n re	Robert L. Beck, Jr.,
	Dawn L. Beck

Case No.	15-30615	
_		

CREDITOR'S NAME,	l c	Hu	sband, Wife, Joint, or Community		CO	U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	TM	E	UZLLQULDAH	+	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxxxxx1003			Opened 10/03/11 Last Active 6/01/15		Т	T E D		
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan			D		3,202.00
Account No. xxxxxxxxxxxxxxxxxxx0308	t		Opened 3/08/12 Last Active 6/01/15		$\dashv$	П	H	
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					
								2,848.00
Account No. xxxxxxxxxxxxxxxxxxx0919			Opened 9/19/11 Last Active 6/01/15					
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					2,817.00
Account No. xxxxxxxxxxxxxxxxx716	✝	H	Opened 7/16/12 Last Active 6/01/15		$\dashv$	Н	Н	
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					2,691.00
Account No. xxxxxxxxxxxxxxxxxx0115	t		Opened 1/15/13 Last Active 6/01/15		$\dashv$	П	Н	
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					2,336.00
Sheet no. 4 of 11 sheets attached to Schedule of				Sı	ıbt	ota	1	42 004 00
Creditors Holding Unsecured Nonpriority Claims			(To	tal of th	is ŗ	pag	e)	13,894.00

In re	Robert L.	Beck, Jr.,
	Dawn I. F	Beck

Case No	15-30615	
_		

CREDITOR'S NAME,	l c	Hu	sband, Wife, Joint, or Community		3   1	ال	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J C H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	) 1 1 1 1 1			SPUTED	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxxxxx716			Opened 7/16/12 Last Active 6/01/15	7	T E			
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					1,739.00
Account No. xxxxxxxxxxxxxxxxx0919	┢	H	Opened 9/19/11 Last Active 6/01/15	+	$^{+}$	$^{+}$	7	
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					
								1,710.00
Account No. xxxxxxxxxxxxxxxxxx0112			Opened 1/12/13 Last Active 6/01/15					
Dept Of Ed/Navient Po Box 9635 Wilkes Barre, PA 18773		С	Student loan					1,030.00
Account No. xxxxxxxxx4680	╂		Opened 3/08/12		+	+		1,000.00
Devry Inc 814 Commerce Dr Oak Brook, IL 60523		С	Consumer debt					700.00
Account No. xxxx7008	T		Opened 2/04/15 Last Active 4/01/12	$\dashv$	$\dagger$	$\dagger$	7	
Integrity Solution Svc 20 Corporate Hills Dr Saint Charles, MO 63301		С	Consumer debt					50.00
Sheet no5 _ of _11 _ sheets attached to Schedule of				Su	bto	tal		E 220 00
Creditors Holding Unsecured Nonpriority Claims			(Total o	of this	s pa	ıge	)	5,229.00

Software Copyright (c) 1996-2014 - Best Cacase w1455306.15-svk Doc 8 Filed 10/14/15 Page 16 of 56

n re	Robert L. Beck, Jr.
	Dawn I Bock

Case No.	15-30615	

		_					
CREDITOR'S NAME,	S	Hu	sband, Wife, Joint, or Community	2	;   U	l D I I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		UN L I QU I DAT ED	U	AMOUNT OF CLAIM
Account No. xxxx9069			Opened 4/08/15 Last Active 8/01/14	7	T		
Nationwide Credit Corp 5503 Cherokee Ave Alexandria, VA 22312		С	Consumer debt		D		528.00
Account No. xxxx6089	┢	$\vdash$	Opened 4/15/15 Last Active 7/01/14	+	十	+	
Nationwide Credit Corp 5503 Cherokee Ave Alexandria, VA 22312		С	Consumer debt				
							528.00
Account No. xxxx9070			Opened 4/08/15 Last Active 7/01/14				
Nationwide Credit Corp 5503 Cherokee Ave Alexandria, VA 22312		С	Consumer debt				
							257.00
Account No. xxxx8201			Opened 6/01/15 Last Active 12/01/10		T	T	
no name on CR Liability		w	Government Secured Direct Loan St Catherines R				
							195.00
Account No. xxxx7008	┢		Opened 2/01/15 Last Active 4/01/12	+	+	+	+
no name on CR Liability		н	Collection Pendrick Inf Le				50.00
Shartan C of 44 shartaneshada S. I. I. S	<u> </u>				<u></u>		
Sheet no. <u>6</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total o		otota s pa		1,558.00

Software Copyright (c) 1996-2014 - Best Cacase w1455306.15-svk Doc 8 Filed 10/14/15 Page 17 of 56

n re	Robert L. Beck, Jr.,
	Dawn L. Beck

Case No	15-30615
Case No	13-30013

						—		
CREDITOR'S NAME,		H	sband, Wife, Joint, or Community		C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M	DATE CLAIM WAS INCURRED AN CONSIDERATION FOR CLAIM. IF CL IS SUBJECT TO SETOFF, SO STAT	AIM	COZHLZGEZH	UM-IND-LZC	SPUTED	AMOUNT OF CLAIM
Account No. xx1512			Opened 10/01/14 Last Active 8/01/14		Т	T E		
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services			D		1,966.00
Account No. x7519	┢	╁	Opened 7/01/10 Last Active 3/01/10			Н	Н	
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services					
								1,519.00
Account No. x2693			Opened 6/01/10 Last Active 2/01/10					
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services					
								540.00
Account No. xx3963	l		Opened 5/01/13 Last Active 2/01/13					
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services					213.00
Aggount No. WW6575	$\vdash$	$\vdash$	Opened 7/04/42 Lest Astive 2/04/42			$\vdash$	Н	210.00
Account No. xx6575  Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Opened 7/01/12 Last Active 3/01/12  Medical services					200.00
Sheet no7 of _11_ sheets attached to Schedule of				S	ubt	tota	.1	4,438.00
Creditors Holding Unsecured Nonpriority Claims				Total of th	is	pag	(e)	4,430.00

In re	Robert L. Beck, Jr.
	Dawn L. Beck

Case No.	15-30615	

CREDITOR'S NAME,	S	Hu	sband, Wife, Joint, or Community	S	U	D I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	DZ1-QD-DAHED	U T F	AMOUNT OF CLAIM
Account No. x6985			Opened 1/01/10 Last Active 9/01/09	]⊤	T E		
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services		D		135.00
Account No. xx4530	┢	┢	Opened 6/01/13 Last Active 3/01/13	+	H	H	
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services				
							122.00
Account No. xx3730			Opened 2/01/13 Last Active 11/01/12				
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services				
							115.00
Account No. xx6026			Opened 5/01/12 Last Active 2/01/12				
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services				
					L		100.00
Account No. xx1781			Opened 2/01/13 Last Active 10/01/12				
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services				100.00
Sheet no. <b>8</b> of <b>11</b> sheets attached to Schedule of				Sub	ota	1	E70.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	572.00

In re	Robert L. Beck, Jr.,
	Dawn L. Beck

Case No.	15-30615	

	١.			<del>_</del>	T	Τ_	1
CREDITOR'S NAME,		Hu	sband, Wife, Joint, or Community	16	UNL	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	l QU	SPUTED	AMOUNT OF CLAIM
Account No. xx3008			Opened 7/01/13 Last Active 4/01/13	7	T E D		
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services		D		100.00
Account No. xx3009	t	$\vdash$	Opened 7/01/13 Last Active 4/01/13	+	十	$\vdash$	
Oliver Adj 3917 47th Ave Kenosha, WI 53144	-	С	Medical services				
							100.00
Account No. x6810			Opened 11/01/09 Last Active 7/01/09				
Oliver Adj 3917 47th Ave Kenosha, WI 53144		С	Medical services				
	_			$\bot$	lacksquare	igspace	94.00
Account No. xx3087	ł		Opened 2/01/12 Last Active 10/01/11				
Oliver Adjustment 3917 47th Ave Kenosha, WI 53144		С	Medical services				
							100.00
Account No. xx5790			Opened 8/01/12 Last Active 5/01/12				
Oliver Adjustment 3917 47th Ave Kenosha, WI 53144		С	Medical services				100.00
				$\perp$	$\perp$	$\perp$	100.00
Sheet no. <b>9</b> of <b>11</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			494.00

In re	Robert L. Beck, Jr.
	Dawn L. Beck

Case No	15-30615	

CREDITOR'S NAME,	CO	Ηι	usband, Wife, Joint, or Community		CON	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	C A M		CLAIM	EN	lъ	S P U T E D	AMOUNT OF CLAIM
Account No.			Judgment Date: 2/11/2008		Т	Ă T E		
UHS Physicians Clinic PO Box 130 Kenosha, WI 53141-0130		С	Judgment Kenosha Co. Case No. 08-SC-270			D		888.14
Account No.						┝		
Attorney Miles Hartley 600 - 52nd Street, Suite 200 Kenosha, WI 53140			Representing: UHS Physicians Clinic					Notice Only
Account No.			Judgment Date: 7/14/2008			Г		
UHS Physicians Clinic PO Box 130 Kenosha, WI 53141-0130		С	Judgment Kenosha Co. Case No. 08-SC-1761					
								145.00
Account No.  Attorney Miles Hartley 600 - 52nd Street, Suite 200 Kenosha, WI 53140			Representing: UHS Physicians Clinic					Notice Only
Account No.			Judgment Date: 7/16/2015					
United Hospital System, Inc. 6308 Eighth Avenue Kenosha, WI 53143-5082		С	Judgment Kenosha Co. Case No. 15-SC-1849					5,956.77
Sheet no. <b>10</b> of <b>11</b> sheets attached to Schedule of		_	1	S	ubt	tota	<u> </u>	
Creditors Holding Unsecured Nonpriority Claims				(Total of th	is :	pag	e)	6,989.91

Software Copyright (c) 1996-2014 - Best Case with 5-306.15-svk Doc 8 Filed 10/14/15

Page 21 of 56

In re	Robert L. Beck, Jr.,	Case No	15-30615
	Dawn L. Beck		

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZHLZGEZH	DZLLQULDA	DISPUTED	AMOUNT OF CLAIM
Account No.  Attorney Miles Hartley 600 - 52nd Street, Suite 200 Kenosha, WI 53140			Representing: United Hospital System, Inc.	] <u> </u>	TED		Notice Only
Account No. xxxxxx0991  Wisconsin Electric Power Co. 231 W Michigan St # A130  Milwaukee, WI 53203		С	Opened 4/01/13 Utilities				
Account No.	L			$\perp$			177.00
Account No.							
Account No.							
Account No.							
Sheet no11_ of _11_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of	Subt			177.00
<u> </u>			(Report on Summary of S	Т	Γota	al	

Software Copyright (c) 1996-2014 - Best Care 3.50 w.1.5 a 3.06.1.5 - svk Doc 8 Filed 10/14/15 Page 22 of 56

•			
	n	12	Δ
	11		u

Robert L. Beck, Jr., Dawn L. Beck

Case No.	15-30615	

Debtors

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. In re

Robert L. Beck, Jr., Dawn L. Beck

Case No.	15-30615	

**Debtors** 

# **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill	in this information to	identify your c	ase:							
Del	btor 1	Robert L. Be	eck, Jr.							
	ouse, if filing)	Dawn L. Bed	:k			_				
Uni	ted States Bankrupto	cy Court for the	EASTERN DISTRICT	OF WISCONSIN		_				
Case number (If known) 15-30615							ed filing nent sho	wing post-petition e following date:		
0	fficial Form	<u>B 6l</u>					MM / DD/	YYYY		
S	chedule I: Y	our Inc	ome							12/13
spo atta	use. If you are sepa ch a separate sheet	arated and you t to this form. Employment	are married and not fili ir spouse is not filing wi On the top of any additi	ith you, do not inclu	ude infor	mati	on about your sp	oouse. I	f more space is	needed,
1.	Fill in your emplo information.	yment		Debtor 1			Debtor	2 or no	n-filing spouse	
	If you have more th		Employment status	☐ Employed	☐ Employed		■ Emp	■ Employed		
	attach a separate printermation about a	0	Employment status	■ Not employed			☐ Not employed			
	employers.		Occupation	UNEMPLOYED	since 9	/201	5 House	keepin	g	
	Include part-time, s self-employed work		Employer's name				Aurora	Health	n Care	
	Occupation may in or homemaker, if it		Employer's address					75th St ha, WI		
			How long employed the	nere?				2013		
Par	t 2: Give Deta	ails About Mor	nthly Income							
	mate monthly incoruse unless you are so		ate you file this form. If	you have nothing to	report for	any	line, write \$0 in th	ie space	. Include your no	n-filing
f yo	ou or your non-filing s e space, attach a se	spouse have mo	ore than one employer, co	ombine the information	on for all	empl	oyers for that per	son on th	ne lines below. If	you need
							For Debtor 1		Debtor 2 or -filing spouse	
2.			ry, and commissions (b calculate what the month		2.	\$	0.00	\$	1,225.10	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4	Calculate gross In	ncome. Add lir	ne 2 + line 3		4	\$	0.00	•	1 225 10	

Official Form B 6I  $\begin{array}{ccc} & & \text{Schedule I: Your Income} \\ \text{Case 15-30615-svk} & \text{Doc 8} & \text{Filed 10/14/15} \end{array}$ Page 25 of 56

page 1

Case number (if known) 15-30615

For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 0.00 1,225.10 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 194.26 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 0.00 5e. Insurance 5e. 0.00 15.21 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ 0.00 \$ 0.00 5h. Other deductions. Specify: 5h.+ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 6. 0.00 209.47 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 0.00 1,015.63 8 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a 0.00 0.00 8b. Interest and dividends 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 1.573.00 8d. **Unemployment compensation** 8d. \$ 0.00 8e. **Social Security** 8e. \$ 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. Pension or retirement income 8g. 0.00 0.00 Other monthly income. Specify: 8h.+ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 1,573.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 1.573.00 \$ 1.015.63 2.588.63 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 2,588.63 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? П

Official Form B 6I

Yes. Explain:

Case 15-30615-svk

Husband was recently laid off and is actively seeking new employment.

Fill	in this inform	nation to identify ye	our case:					
Deb	tor 1	Robert L. Be	ck, Jr.			Ch	eck if this is:	
							An amended filing	
	tor 2 ouse, if filing)	Dawn L. Bed	<u>:K</u>				A supplement show 13 expenses as of	wing post-petition chapter the following date:
		kruptcy Court for the:	: EASTE	RN DISTRICT OF WISCO	NSIN		MM / DD / YYYY	
				2.0				
	e number	15-30615					A separate filing fo 2 maintains a sepa	r Debtor 2 because Debtor rate household
Of	fficial F	orm B 6J						
		e J: Your						12/13
Be info nur	as complete ormation. If nber (if kno	e and accurate as more space is ne wn). Answer eve	s possible. eeded, atta ry question	. If two married people a ch another sheet to this				
Par 1.	t 1: Des	cribe Your House	hold					
١.								
	□ No. Go	to line 2.	in a conor	ata haysahald?				
			iii a sepai	ate nousenoid?				
			st file a sep	parate Schedule J.				
2.	Do you ha	ve dependents?	□ No					
	Do not list and Debtor		■ Yes.	Fill out this information for each dependent	Dependent's relations Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not stat dependent				Daughter		21	□ No ■ Yes
					Daughter		25	□ No ■ Yes
								■ res □ No
								☐ Yes
							<del>-</del>	□ No
								☐ Yes
3.	expenses	xpenses include of people other t nd your depende	han 🗖	No Yes				
		mate Your Ongoi						
exp		f a date after the		uptcy filing date unless y y is filed. If this is a supp				apter 13 case to report of the form and fill in the
the		ch assistance an		government assistance i cluded it on <i>Schedule I:</i> `			Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgage	4.	\$	785.00
	If not inclu	uded in line 4:						
	4a. Rea	l estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	· -	0.00
	4c. Hom	ne maintenance, re	epair, and ι	upkeep expenses		4c.	\$	0.00
_		neowner's associa				4d.	\$	0.00
<b>h</b>	Additional	mortagae navm	ante tar w	<b>ur rocidonco</b> , cuch ac ho	ma aquity lagne	5		0.00

Official Form B 6J Schedule J: Your Expenses page 1

	otor 1 otor 2	Robert L. Beck, Jr. Dawn L. Beck	Case num	ber (if known)	15-30615
6.	Utilit	ies:			
	6a.	Electricity, heat, natural gas	6a.	\$	175.00
	6b.	Water, sewer, garbage collection	6b.	\$	40.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	6d.	Other. Specify: Cable/Internet/Home Phone	6d.	\$	249.00
		Cellular telephone service		\$	320.00
7.	Food	and housekeeping supplies		\$	800.00
8.	Child	dcare and children's education costs	8.	\$	0.00
9.	Clotl	ning, laundry, and dry cleaning	9.	\$	250.00
10.		onal care products and services	10.	\$	100.00
11.	Medi	ical and dental expenses	11.	\$	240.00
12.	Tran	sportation. Include gas, maintenance, bus or train fare.		·	
		ot include car payments.	12.	\$	350.00
13.	Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14.	Char	itable contributions and religious donations	14.	\$	0.00
15.		rance.			
		ot include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance	15a.	·	0.00
		Health insurance	15b.	*	0.00
	15c.	Vehicle insurance	15c.	\$	220.00
		Other insurance. Specify:	15d.	\$	0.00
	Spec	·	16.	\$	0.00
17.		illment or lease payments:	47-	<b>c</b>	0.00
		Car payments for Vehicle 1	17a.	·	0.00
		Car payments for Vehicle 2	17b.	·	0.00
		Other. Specify:	17c.	·	0.00
		Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as	<b>s</b> 18.	\$	0.00
10	dedu	acted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  The payments you make to support others who do not live with you.	10.	\$	
19.			19.	Ф	0.00
20	Spec	er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i>		our Incomo	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20a. 20b.	:	0.00
		Property, homeowner's, or renter's insurance	20c.	·	0.00
			20d.		
		Maintenance, repair, and upkeep expenses		·	0.00
04		Homeowner's association or condominium dues	20e.	· . <del></del>	0.00
21.	Otne	r: Specify:	21.	+\$	0.00
	The	r monthly expenses. Add lines 4 through 21. result is your monthly expenses.	22.	\$	3,629.00
23.		ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,588.63
	23b.	Copy your monthly expenses from line 22 above.	23b.	-\$	3,629.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-1,040.37
24.	For exmodif				se or decrease because of a
	☐ Y				

Official Form B 6J Schedule J: Your Expenses page 2

# **United States Bankruptcy Court Eastern District of Wisconsin**

In re	Robert L. Beck, Jr. Dawn L. Beck		Case No.	15-30615	
		Debtor(s)	Chapter	7	

# DECLARATION CONCERNING DEBTOR'S SCHEDULES

# DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting

of 28 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date	October 5, 2015	Signature	/s/ Robert L. Beck, Jr.	
			Robert L. Beck, Jr.	
			Debtor	
Date	October 5, 2015	Signature	/s/ Dawn L. Beck	
		<del></del>	Dawn L. Beck	
			Joint Debtor	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# United States Bankruptcy Court Eastern District of Wisconsin

In re	Robert L. Beck, Jr. Dawn L. Beck		Case No.	15-30615
		Debtor(s)	Chapter	7

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

# 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE
\$48,937.61 2015 YTD: Husband, Employment income
\$10,237.81 2015 YTD: Wife, Employment income
\$60,696.00 2014: Husband & Wife, Employment income

# 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

2013: Husband & Wife, Employment income

AMOUNT SOURCE

\$62,050.00

AMOUNT \$4.810.00 SOURCE

2014: Unemployment compensation

# 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL **OWING** 

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF

**AMOUNT** PAID OR VALUE OF

AMOUNT STILL

NAME AND ADDRESS OF CREDITOR

PAYMENTS/ **TRANSFERS** 

**TRANSFERS** 

**OWING** 

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING** 

# 4. Suits and administrative proceedings, executions, garnishments and attachments

None 

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**CAPTION OF SUIT** AND CASE NUMBER United Hospital System, Inc vs. Dawn L Beck et al; Kenosha County Case Number 2015SC001849

NATURE OF PROCEEDING **Small Claims** 

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

Kenosha County Circuit Court -Kenosha, WI

Closed / **Judgment** 

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

# 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

## 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

## 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

# 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

# 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Nickolai & Poletti, LLC 308 Milwaukee Avenue Burlington, WI 53105 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 9/21/2015

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$1,465.00

1

### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

## 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

# 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

# 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

# 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

### 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

# 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

## NAME

### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which None

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

## 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS **ENDING DATES** 

**BEGINNING AND** 

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



**ADDRESS** NAME

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

## 19. Books, records and financial statements

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

# NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

7

### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME None **ADDRESS** 

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

Q

### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	October 5, 2015	Signature	/s/ Robert L. Beck, Jr.	
			Robert L. Beck, Jr.	
			Debtor	
Date	October 5, 2015	Signature	/s/ Dawn L. Beck	
			Dawn L. Beck	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

# **United States Bankruptcy Court** Eastern District of Wisconsin

		Case No.	15-30615
	Debtor(s)	Chapter	7
DISCLOSURE OF COMPI	ENSATION OF ATTOR	RNEY FOR DE	CBTOR(S)
ompensation paid to me within one year before the fil	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
For legal services, I have agreed to accept		\$	1,465.00
Prior to the filing of this statement I have received	d	\$	1,465.00
Balance Due		\$	0.00
he source of the compensation paid to me was:			
■ Debtor □ Other (specify):			
he source of compensation to be paid to me is:			
■ Debtor □ Other (specify):			
I have not agreed to share the above-disclosed con	npensation with any other person to	unless they are memb	pers and associates of my law firm.
n return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy ca	ase, including:
Preparation and filing of any petition, schedules, st Representation of the debtor at the meeting of cred	atement of affairs and plan which	may be required;	
Negotiations with secured creditors to reaffirmation agreements and applicat	ions as needed; preparation		
			es, relief from stay actions or
	CERTIFICATION		
certify that the foregoing is a complete statement of a nkruptcy proceeding.	ny agreement or arrangement for	payment to me for re	presentation of the debtor(s) in
October 5, 2015	/s/ Anton B. Nicko	olai	
	prior to the filing of this statement I have received Balance Due  the source of the compensation paid to me was:  Debtor  Other (specify):  I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the necessary of the debtor's financial situation, and ren Preparation and filing of any petition, schedules, st Representation of the debtor's financial situation, schedules, st Representation of the debtor's nany of any other adversary proceeding.	Debtor(s)  DISCLOSURE OF COMPENSATION OF ATTOR  ursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b). I certify that I am the atto  propensation paid to me within one year before the filing of the petition in bankruptcy,  rendered on behalf of the debtor(s) in contemplation of or in connection with the ban  For legal services, I have agreed to accept.  Prior to the filing of this statement I have received  Balance Due  the source of the compensation paid to me was:  Debtor Other (specify):  The best best of the compensation to be paid to me is:  Debtor Other (specify):  I have agreed to share the above-disclosed compensation with any other person or persons we copy of the agreement, together with a list of the names of the people sharing in the meturn for the above-disclosed fee, I have agreed to render legal service for all aspects  Analysis of the debtor's financial situation, and rendering advice to the debtor in dete Preparation and filing of any petition, schedules, statement of affairs and plan which Representation of the debtor at the meeting of creditors and confirmation hearing, an [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exe reaffirmation agreements and applications as needed; preparation 522(f)(2)(A) for avoidance of liens on household goods.  y agreement with the debtor(s), the above-disclosed fee does not include the following Representation of the debtors in any dischargeability actions, judic any other adversary proceeding.  CERTIFICATION  certify that the foregoing is a complete statement of any agreement or arrangement for inkruptcy proceeding.  October 5, 2015  // Anton B. Nickolai Nickolai & Poletti, 308 Milwaukee As Burilington, Wil 53 (262)757-8444 Fe	Debtor(s)  Chapter  DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DE  DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DE  DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DE  DEBTOR DEPTOR DESTRUCTION OF ATTORNEY FOR DE  SUBJECTION OF ATTORNEY FOR DE  DESTRUCTION OF ATTORNEY  CHAPTER  DESTRUCTION OF ATTORNEY  Chapter  DESTRUCTION OF ATTORNEY  DESTRUCTION OF ATTORNEY  DESTRUCTION OF ATTORNEY  CHAPTER  DESTRUCTION  CHAPTER  DESTRUCTOR  DESTRUCTOR  SERVED  STANDARY  SERVEN  STANDARY  SERVED  STANDA

# **United States Bankruptcy Court** Eastern District of Wisconsin

In re	Robert L. Beck, Jr. Dawn L. Beck		Case No.	15-30615
-		Debtor(s)	Chapter	7
	CHAPTER 7	INDIVIDUAL DEBTOR'S STATI	EMENT OF INTEN	TION
PART		y of the estate. (Part A must be fully h additional pages if necessary.)	completed for EAC	H debt which is secured by
Propert	y No. 1			
Credite	or's Name: -	Describe Pr	operty Securing Debt	:
Propert	y will be (check one):			
	Surrendered	☐ Retained		
	ning the property, I intend to (che Redeem the property Reaffirm the debt	eck at least one):		
	Other. Explain	(for example, avoid lien using	11 U.S.C. § 522(f)).	
	y is (check one): Claimed as Exempt	☐ Not claim	ned as exempt	

Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: -NONE-	1	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ YES ☐ NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date	October 5, 2015	Signature	/s/ Robert L. Beck, Jr.
		C	Robert L. Beck, Jr.
			Debtor
Date	October 5, 2015	Signature	/s/ Dawn L. Beck
		C	Dawn L. Beck
			Joint Debtor

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF WISCONSIN

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

## 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy">http://www.uscourts.gov/bkforms/bankruptcy</a> forms.html#procedure.

B 201B (Form 201B) (12/09)

## United States Bankruptcy Court Eastern District of Wisconsin

In re	Robert L. Beck, Jr. Dawn L. Beck		Case No.	15-30615	
		Debtor(s)	Chapter	7	

# CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

### **Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Robert L. Beck, Jr. Dawn L. Beck	X /s/ Robert L. Beck, Jr.	October 5, 2015
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known) <b>15-30615</b>	${ m X}$ /s/ Dawn L. Beck	October 5, 2015
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# **United States Bankruptcy Court Eastern District of Wisconsin**

In re	Robert L. Beck, Jr. Dawn L. Beck		Case No.	15-30615
		Debtor(s)	Chapter	7
The abo		CIFICATION OF CREDITOR MA		of their knowledge.
Date:	October 5, 2015	/s/ Robert L. Beck, Jr.		
		Robert L. Beck, Jr.		
		Signature of Debtor		
Date:	October 5, 2015	/s/ Dawn L. Beck		
		Dawn L. Beck		

Signature of Debtor

Fill in this information to identify your case:  Debtor 1 Robert L. Beck, Jr.	Check one box only as directed in this form and in Form 22A-1Supp:
Debtor 2	<ul> <li>□ 1. There is no presumption of abuse</li> <li>■ 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test Calculation</i> (Official Form 22A-2).</li> <li>□ 3. The Means Test does not apply now because of qualified military service but it could apply later.</li> </ul>
Official Form 22A - 1 Chapter 7 Statement of Your Current Month	☐ Check if this is an amended filing  Name 12/14
Be as complete and accurate as possible. If two married people are filing to	
space is needed, attach a separate sheet to this form. Include the line numb additional pages, write your name and case number (if known). If you believ you do not have primarily consumer debts or because of qualifying military Presumption of Abuse Under § 707(b)(2) (Official Form 22A-1Supp) with this	per to which the additional information applies. On the top of any re that you are exempted from a presumption of abuse because service, complete and file Statement of Exemption from
space is needed, attach a separate sheet to this form. Include the line numb additional pages, write your name and case number (if known). If you believ you do not have primarily consumer debts or because of qualifying military Presumption of Abuse Under § 707(b)(2) (Official Form 22A-1Supp) with this	per to which the additional information applies. On the top of any re that you are exempted from a presumption of abuse because service, complete and file Statement of Exemption from

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Living separately or are legally separated. fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are

				Colui <b>Debt</b>		Debt	mn B tor 2 or filing spouse	
<ol><li>Your gross wages, salary, tips, bonuses, overtime, all payroll deductions).</li></ol>	and c	ommissi	ons (before	\$	6,301.29	\$	1,225.10	
3. <b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	paym	ents from	a spouse if	\$	0.00	\$	0.00	
4. All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	Includ I, your	de regula depende	r contributions ents, parents,	\$	0.00	\$	0.00	
<ol> <li>Net income from operating a business, profession,</li> <li>Gross receipts (before all deductions)</li> </ol>	or far \$	m 0.00						
Ordinary and necessary operating expenses	<b>-</b> \$	0.00						
Net monthly income from a business, profession, or fare	m \$ _	0.00	Copy here -> 3	\$	0.00	\$	0.00	
6. Net income from rental and other real property								
Gross receipts (before all deductions)	\$_	0.00						
Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00						
Net monthly income from rental or other real property	\$_	0.00	Copy here -> 3	\$	0.00	\$	0.00	
					0.00	\$	0.00	

Official Form 22A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 1

15-30615

				Column A Debtor 1		Column B Debtor 2 o	or	
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amour under the Social Security Act. Instead, list it here:	nt received was a ber	nefit					
	For you\$	(	0.00					
	For your spouse \$		0.00					
9.	<b>Pension or retirement income.</b> Do not include any ar benefit under the Social Security Act.	mount received that v	was a	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Sp. Do not include any benefits received under the Social received as a victim of a war crime, a crime against hu domestic terrorism. If necessary, list other sources on total on line 10c.	Security Act or paym manity, or internation	ents nal or					
	10a			\$	0.00	\$	0.00	
	10b			\$	0.00	\$	0.00	
	10c. Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column A		\$	6,301.29	+ \$ _	1,225.10		7,526.39
							Total ci	urrent monthly
Part	2: Determine Whether the Means Test Applies to	to You						
12	Calculate your current monthly income for the year	. Follow these steps						
	12a. Copy your total current monthly income from line	•		Con	ı lina 11	horo-> 12	a. \$	7,526.39
	12a. Copy your total current monthly income from line	11			yc	11010-2	α.   Ψ	7,520.39
	Multiply by 12 (the number of months in a year)						<b>x</b> 1	2
	12b. The result is your annual income for this part of the	ne form				12	b. \$ <b>9</b>	0,316.68
13.	Calculate the median family income that applies to	you. Follow these st	teps:					
	Fill in the state in which you live.	WI	]					
	,, <b>,</b>		J 1					
	Fill in the number of people in your household.	4						
	Fill in the median family income for your state and size	of household.				13	. \$8	3,686.00
4.4	Have do the lines commerce?							
14.	How do the lines compare?	on the ten of nega 1	ah aalt ha	v 1 Thoroic	no nroo	mation of obj	100	
	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	, , ,		·	,	•		
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 22A-2.	of page 1, check box	2, The p	resumption o	f abuse is	s determined	by Form 2:	2A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information	on this s	tatement and	in any at	tachments is	true and c	orrect.
	X /s/ Robert L. Beck, Jr.	Х	/s/ Daw	n L. Beck				
	Robert L. Beck, Jr.			Beck				
	Signature of Debtor 1	_	Ū	e of Debtor 2				
	Date October 5, 2015 MM / DD / YYYY	Date		er 5, 2015 O / YYYY				
	If you checked line 14a, do NOT fill out or file For	m 22A-2.	IVIIVI / DL	. , , , , , ,				
	If you checked line 14b, fill out Form 22A-2 and fil							
	, ou onconce into 1-b, fill out I offit 22/1-2 drie ill	o it with this follow.						

Official Form 22A-1

Fill in this information to identify your case:			
Debtor 1	Robert L. Beck, Jr.		
Debtor 2	Dawn L. Beck		
(Spouse, if filing	(Spouse, if filing)		
United States B	ankruptcy Court for the: Eastern District of Wisconsin		
Case number 15-30615			
(if known)			

Check one box only as directed in lines 40 or 42:

According to the calculations required by this Statement:

1. There is no presumption of abuse.

☐ Check if this is an amended filing

# Official Form 22A - 2

# **Chapter 7 Means Test Calculation**

12/14

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly income (Official Form 22A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	t 1: Calculate You	r Adjusted Income					
1.	Copy your total curre	ent monthly income.	Copy line 11 from	om Official Form 22	A-1 here=>1	. \$	7,526.39
2.	Did you fill out Colur  ☐ No. Fill in \$0 on li  ☐ Yes. Is your spous ☐ No. Go to li ☐ Yes. Fill in \$	e Filing with you?					
3.	No. Fill in \$0 on li ☐ Yes. Fill in the info		ollow these steps:	Fill in the amou	int you from	<b>;</b>	
	support other th	an you or your dependents.		your spouse's i			
	3b			\$			
		lines 32 3h and 3c		\$ \$0.00			
	Su. Total. Add	lines 3a, 3b, and 3c		Ψ	Copy total here=>	<b>&gt;</b> 3d. <b>-</b> \$_	0.00
4.	Adjust your current r	nonthly income. Subtract line	3d from line 1.			\$	7,526.39

Official Form 22A-2

**Chapter 7 Means Test Calculation** 

page 1

Page 46 of 56

15-30615

Da		ς.	
-	Iι	<b>∠</b> .	

Debtor 1

Debtor 2

#### Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 22A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 22A-1 is filled in.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1.513.00

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older-because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

#### People who are under 65 years of age

7a. Out-of-pocket health care allowance per person

7b. Number of people who are under 65

X \_\_\_\_4

7c. **Subtotal.** Multiply line 7a by line 7b.

240.00

Copy line 7c here=> \$

240.00

#### People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person

144

7e. Number of people who are 65 or older

0

7f. **Subtotal.** Multiply line 7d by line 7e.

0.00

Copy line 7f here=> \$

7g. Total. Add line 7c and line 7f

240.00

Copy total here=> 7g.

240.00

15-30615

Loc	al Sta	andards You must use the IRS Local Standards to	answer the qu	uestions in lir	nes 8-15.				
		n information from the IRS, the U.S. Trustee Progr tcy purposes into two parts:	ram has divid	led the IRS I	₋ocal Sta	andard for h	ousing for		
		and utilities - Insurance and operating expenses and utilities - Mortgage or rent expenses							
To a	answ	er the questions in lines 8-9, use the U.S. Trustee	Program cha	rt.					
	ind th k's of	e chart, go online using the link specified in the sepa fice.	rate instruction	ns for this for	m. This o	chart may als	so be available	at the t	oankruptcy
8.		sing and utilities - Insurance and operating exper the dollar amount listed for your county for insurance			people y	ou entered ir	n line 5, \$_		605.00
9.	Hou	sing and utilities - Mortgage or rent expenses:							
	9a.	Using the number of people you entered in line 5, fill listed for your county for mortgage or rent expenses.		amount		9a. \$ _	1,524.00		
	9b.	Total average monthly payment for all mortgages an	d other debts	secured by y	our hom	e.			
		To calculate the total average monthly payment, additional contractually due to each secured creditor in the 60 for bankruptcy. Then divide by 60.							
		Name of the creditor	Average payment						
		-NONE-	\$						
		9b. Total average monthly payment	\$	0.00	Copy li 9b here		0.00		
	9c.	Net mortgage or rent expense.							
		Subtract line 9b (total average monthly payment) fro or rent expense). If this amount is less than \$0, enter		rtgage	9c. \$_	1,524	.00 Copy line 9c here=>	\$	1,524.00
10.	affe	ou claim that the U.S. Trustee Program's division of the calculation of your monthly expenses, fill i					rrect and	\$	0.00
	Ex	plain why:							
11.	Loc	al transportation expenses: Check the number of v	ehicles for whi	ich you claim	an owne	ership or ope	rating expense		
		. Go to line 14.							
	□ 1	. Go to line 12.							
	<b>=</b> 2	or more. Go to line 12.							
12.	<b>Veh</b> ope	icle operation expense: Using the IRS Local Standarating expenses, fill in the Operating Costs that apply	ards and the n for your Cens	umber of vel us region or	nicles for metropoli	which you cl tan statistica	aim the al area.	\$	524.00

Debtor 1 Debtor 2

10.		ownership or lease ex not claim the expense	<b>xpense:</b> Using the IRS if you do not make an			et owne	iship or lease	expense for	each ve	crificio delow.
Ve	hicle 1	Describe Vehicle 1:	2005 Chevrolet Ed	quinox						
13a	Ownersh	nip or leasing costs usin	ng IRS Local Standard		13a.	\$	200.00			
13b	_	monthly payment for al	•	nicle 1.						
	are conti	late the average month ractually due to each se tcy. Then divide by 60.								
	Nar	me of each creditor fo	r Vehicle 1	Average mo payment	onthly					
	-NO	ONE-		\$						
					Copy 13b here =>	-\$	0.00			
13c.	Net Vehi	icle 1 ownership or leas	se expense					Copy net		
	Subtract	line 13b from line 13a.	if this amount is less the	han \$0, enter \$0.	13c.	\$	200.00	Vehicle 1 expense here => \$	S	200.00
	hicle 2  Ownersh	Describe Vehicle 2:	2004 Buick Lesab	re	13d.	\$	200.00			
13d	Ownersh	nip or leasing costs usin	ng IRS Local Standard			\$	200.00			
13d	Ownersh Average	nip or leasing costs usin	ng IRS Local Standard		e costs for	\$	200.00			
13d	Ownersh Average leased v	nip or leasing costs usin monthly payment for al ehicles.	ng IRS Local Standard	nicle 2. Do not includ  Average mo	e costs for	\$	200.00			
13d	Ownersh Average leased v	nip or leasing costs usin monthly payment for al ehicles.  me of each creditor for	ng IRS Local Standard	Average mo payment	e costs for	\$	200.00			
13d 13e	Ownersh Average leased v	nip or leasing costs usin monthly payment for al ehicles.  me of each creditor for	ng IRS Local Standard Il debts secured by Vel	Average mo payment	e costs for onthly Copy 13e	\$ -\$		Copy net		
13d 13e	Ownersh Average leased volume Nar -NC	nip or leasing costs using monthly payment for all ehicles.  me of each creditor for DNE-	ng IRS Local Standard Il debts secured by Vel r Vehicle 2	Average mo payment	e costs for onthly Copy 13e	-\$		Copy net Vehicle 2 expense here => \$	3	200.00
13d 13e	Ownersh Average leased von Nar -NC Net Vehi Subtract	mip or leasing costs using monthly payment for all ehicles.  me of each creditor for DNE-  icle 2 ownership or leas	ng IRS Local Standard II debts secured by Vel  r Vehicle 2  se expense if this amount is less the	Average mo payment  \$	Copy 13e here =>	-\$	200.00	Vehicle 2 expense here => \$	\$	200.00
13d 13e 13f.	Nar  Net Vehi Subtract  Public to	mip or leasing costs using monthly payment for all ehicles.  me of each creditor for all ehicles.  DNE-  icle 2 ownership or least line 13b from line 13a.  ransportation expense allowanger expense allowanger.	ng IRS Local Standard II debts secured by Vel  r Vehicle 2  se expense if this amount is less the secured of the secured by Vel  e: If you claimed 0 veh ace regardless of wheth	Average mopayment  \$	Copy 13e here =>  13f.  g the IRS Locansportation.	-\$ \$	<b>200.00</b> dards, fill in the	Vehicle 2 expense here => \$		
13d 13e 13f.	Nar  Net Vehi Subtract  Public to Transport  Addition also ded	mip or leasing costs usin monthly payment for all ehicles.  me of each creditor for all ehicles.  DNE-  icle 2 ownership or leas line 13b from line 13a.	ng IRS Local Standard II debts secured by Vel  r Vehicle 2  ee expense if this amount is less the secured of the secured by Vel  ee: If you claimed 0 veh ince regardless of wheth on expense: If you claimed on expense, you may	Average mopayment  \$ han \$0, enter \$0.  icles in line 11, using her you use public training to more vehicles in what you believen.	Copy 13e here =>  13f.  1 the IRS Locansportation.  cles in line 11	-\$ \$ al Stand	0.00  200.00  dards, fill in the	Vehicle 2 expense here => \$ Public  you may ou may		

Debtor 1 Debtor 2

Other Necessary Expens	In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	s for	
self-employment taxe from your pay for the	nthly amount that you will actually owe for federal, state and local taxes, such as income taxes, es, social security taxes, and Medicare taxes. You may include the monthly amount withheld se taxes. However, if you expect to receive a tax refund, you must divide the expected refund by number from the total monthly amount that is withheld to pay for taxes.		4 720 20
Do not include real e	state, sales, or use taxes.	\$	1,730.38
	<b>ons:</b> The total monthly payroll deductions that your job requires, such as retirement dues, and uniform costs.		
Do not include amou	nts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	10.00
filing together, includ	total monthly premiums that you pay for your own term life insurance. If two married people are e payments that you make for your spouse's term life insurance. Do not include premiums for r dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$_	0.00
	nents: The total monthly amount that you pay as required by the order of a court or y, such as spousal or child support payments.		
Do not include paym	ents on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
as a condition for you	I monthly amount that you pay for education that is either required: ur job, or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21. <b>Childcare:</b> The total preschool.	monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and		
Do not include paym	ents for any elementary or secondary school education.	\$	0.00
that is required for th	are expenses, excluding insurance costs: The monthly amount that you pay for health care e health and welfare of you or your dependents and that is not reimbursed by insurance or paid account. Include only the amount that is more than the total entered in line 7.		
Payments for health	insurance or health savings accounts should be listed only in line 25.	\$	35.00
services for you and business cell phone	and telephone services: The total monthly amount that you pay for telecommunication your dependents, such as pagers, call waiting, caller identification, special long distance, or service, to the extent necessary for your health and welfare or that of your dependents or for the e, if it is not reimbursed by your employer.		
	ents for basic home telephone, internet and cell phone service. Do not include self-employment nose reported on line 5 of Official Form 22A-1, or any amount you previously deducted.	+\$_	50.00
24. Add all of the exper Add lines 6 through 2	nses allowed under the IRS expense allowances. 23.	\$	6,631.38

Add	itional Expense Deductions These are additional	I deduction	s allowed by the	he Means Test.		
	Note: Do not include	e any exper	nse allowances	s listed in lines 6-24.		
25.	Health insurance, disability insurance, and health insurance, disability insurance, and health savings are your dependents.				r	
	Health insurance	\$	496.02			
	Disability insurance	\$	0.00			
	Health savings account	+ \$	0.00			
	Total	\$	496.02	Copy total here=>	\$	496.02
	Do you actually spend this total amount?			_		
	<ul><li>□ No. How much do you actually spend?</li><li>■ Yes</li></ul>	\$				
26.	Continued contributions to the care of household continue to pay for the reasonable and necessary ca of your household or member of your immediate fam	l or family re and supp	port of an elde	rly, chronically ill, or disabled member	\$	120.00
27.	<b>Protection against family violence.</b> The reasonable safety of you and your family under the Family Violence.					
	By law, the court must keep the nature of these expe	nses confid	dential.		\$	0.00
28.	<b>Additional home energy costs.</b> Your home energy allowance on line 8.	costs are ir	ncluded in you	r non-mortgage housing and utilities		
	If you believe that you have home energy costs that non-mortgage housing and utilities allowance, then for					
	You must give your case trustee documentation of you amount claimed is reasonable and necessary.	our actual e	expenses, and	you must show that the additional	\$	0.00
29.	Education expenses for dependent children who \$156.25* per child) that you pay for your dependent of public elementary or secondary school.					
	You must give your case trustee documentation of you claimed is reasonable and necessary and not alread					
	* Subject to adjustment on 4/01/16, and every 3 year	s after that	for cases beg	un on or after the date of adjustment.	\$	0.00
30.	Additional food and clothing expense. The month higher than the combined food and clothing allowance than 5% of the food and clothing allowances in the IF	es in the IF	RS National Sta			
	To find a chart showing the maximum additional allowinstructions for this form. This chart may also be available.					
	You must show that the additional amount claimed is	reasonabl	e and necessa	ary.	\$	53.00
31.	<b>Continuing charitable contributions.</b> The amount instruments to a religious or charitable organization.				\$	25.00
32.	Add all of the additional expense deductions Add lines 25 through 31.				\$	694.02

15-30615

	ctions for Debt Payment					
lo	ans, and other secured debt, fill in li	<b>5 5</b>				
	o calculate the total average monthly pareditor in the 60 months after you file fo	ayment, add all amounts that are contractually r bankruptcy. Then divide by 60.	due to e	each secured		
	Mortgages on your home:					verage monthly syment
33a.	Copy line 9b here				=> \$	0.00
	Loans on your first two vehicles					
33b.					=> \$	0.00
33c.	Copy line 13e here				=> \$	0.00
Name	of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes of insurance?		
				□ No		
33d.	-NONE-			☐ Yes	\$	
:				- 		
00-				□ No	Φ.	
33e.				☐ Yes	\$	
				□ No		
33f.				☐ Yes	+\$	
33g.	Total average monthly payment. Add I	ines 33a through 33f	\$	0.00	Copy total here=>	\$0.00
34. <b>A</b> ı		secured by your primary residence, a vehi	cle,			
	r other property necessary for your s	support or the support of your dependents?				
	No. Go to line 35.					
01	No. Go to line 35.  Yes. State any amount that you must	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> )				
OI	No. Go to line 35.  Yes. State any amount that you mus listed in line 33, to keep posse	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> )		Total cure amount		Monthly cure amount
Name	No. Go to line 35.  Yes. State any amount that you mustisted in line 33, to keep posse Next, divide by 60 and fill in the	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> ) a information below.		amount	÷ 60 = \$	amount
Name	No. Go to line 35.  Yes. State any amount that you mustisted in line 33, to keep posses. Next, divide by 60 and fill in the e of the creditor	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> ) a information below.		amount	÷ 60 = \$	amount
Name	No. Go to line 35.  Yes. State any amount that you mustisted in line 33, to keep posses. Next, divide by 60 and fill in the e of the creditor	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> ) a information below.	\$ \$	amount	÷ 60 = \$  Copy total here=>	amount
Nam-NO	No. Go to line 35.  Yes. State any amount that you must listed in line 33, to keep posses. Next, divide by 60 and fill in the e of the creditor.  NE-	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> ) a information below.  Identify property that secures the debt	\$ al \$	amount	Copy	amount
Nam-NO	No. Go to line 35.  Yes. State any amount that you must listed in line 33, to keep posses. Next, divide by 60 and fill in the e of the creditor.  NE-	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> ) information below.  Identify property that secures the debt  Totals a priority tax, child support, or alimony -	\$ al \$	amount	Copy	amount
Nam-NO	No. Go to line 35.  Yes. State any amount that you must listed in line 33, to keep posses. Next, divide by 60 and fill in the e of the creditor.  NE-  o you owe any priority claims such a re past due as of the filing date of you like it is not a such a repast due as of the filing date of you like it is not a such a repast due as of the filing date of you like it is not a such a	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> ) e information below.  Identify property that secures the debt  Totals a priority tax, child support, or alimony - tur bankruptcy case? 11 U.S.C. § 507.	\$shat	amount	Copy	amount

36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link for Bankrupty Basics may also be available at the bankrupty clerk's office.     No. Go to line 37.     Yes. File in the following information.			
Pres. Fill in the following information.  Projected monthly plan payment if you were filing under Chapter 13  Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  Average monthly administrative expense if you were filing under Chapter 13  37. Add all of the deductions for debt payment.  Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expenses allowances  Copy line 37, All of the additional expense deductions  Copy line 37, All of the deductions for debt payment  Total deductions  Total deductions  Determine Whether There is a Presumption of Abuse  39. Calculate monthly disposable income for 60 months  39a. Copy line 4, adjusted current monthly income  \$ 7,526.39  39b. Copy line 38, Total deductions  \$ 7,389.31  Copy line 38 total deductions  \$ 137.08  For the next 60 months (5 years)  X 60  Copy line  40. Find out whether there is a presumption of abuse. Check the box that applies:  The line 39d is sets than \$7,475^*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.	For more information, go online using the link for Bankruptcy Bas	s specified in the separate	
Projected monthly plan payment if you were filing under Chapter 13  Current multiplier for your district as stated on the list issued by the Administrative Chicke of the United States Cours (for all other districts).  Average monthly administrative expense if you were filing under Chapter 13  X  4.20  Copy total here \$\frac{2}{1.00}\$ \ \text{Loc} \text{Capy total here} \text{S} \ \text{21.00} \ \text{Loc} \text{Loc} \text{S} \ \text{21.00} \ \text{Loc} \tex	☐ No. Go to line 37.		
Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  Average monthly administrative expense if you were filing under Chapter 13  37. Add all of the deductions for debt payment.  Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances.  Copy line 24, All of the additional expense deductions.  Copy line 37, All of the deductions for debt payment.  **S** 63.91  Total deductions  **Determine Whether There is a Presumption of Abuse*  39. Calculate monthly disposable income for 60 months  38a. Copy line 38, Total deductions  39b. Copy line 38, Total deductions  **S** 7,389.31  **S**	Yes. Fill in the following information.		
Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  Average monthly administrative expense if you were filing under Chapter 13  37. Add all of the deductions for debt payment.  Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances  Copy line 32, All of the expenses allowed under IRS expense allowances  Copy line 37, All of the deductions for debt payment  Total deductions  39. Calculate monthly disposable income for 60 months  39a. Copy line 38, Total deductions  39b. Copy line 38, Total deductions  For the next 60 months (5 years)  For the next 60 months (5 years)  40. Find out whether there is a presumption of abuse. Check the box that applies:  The line 39d is nore than \$12,475^*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.	Projected monthly plan payment if you were filing under	Chapter 13 \$	500.00
Average monthly administrative expense if you were filing under Chapter 13  \$ 21.00   here	Administrative Office of the United States Courts (for diand North Carolina) or by the Executive Office for Unite	tricts in Alabama States Trustees	
Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowences  Copy line 32, All of the additional expense deductions  \$ 6,631.38	Average monthly administrative expense if you were filing	g under Chapter 13 \$	04.00
38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances  Copy line 32, All of the additional expense deductions  Copy line 37, All of the deductions for debt payment  Total deductions  S 6,631.38  Copy total here=> \$ 7,389.31  Copy total here=> \$ 7,389.31  Total deductions  39. Calculate monthly disposable income for 60 months  39a. Copy line 4, adjusted current monthly income  S 7,526.39  39b. Copy line 38, Total deductions  - \$ 7,389.31  Copy line 39a here=> \$ 137.08  For the next 60 months (5 years)  X 60  40. Find out whether there is a presumption of abuse. Check the box that applies:  The line 39d is less than \$7,475°. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475°, but not more than \$12,475°. Go to line 41.	• •		\$63.91_
Copy line 24, All of the expenses allowed under IRS expense allowances  Copy line 32, All of the additional expense deductions  Sequence allowances  Copy line 37, All of the deductions for debt payment  Total deductions  Sequence allowances	Total Deductions from Income		
expense allowances  Copy line 32, All of the additional expense deductions  Copy line 37, All of the deductions for debt payment  Total deductions  Determine Whether There is a Presumption of Abuse  39. Calculate monthly disposable income for 60 months  39a. Copy line 4, adjusted current monthly income  \$ 7,526.39  39b. Copy line 38, Total deductions  -\$ 7,389.31  Copy line 38, Total deductions  -\$ 7,389.31  Copy line 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2).  Subtract line 39b from line 39a  Total. Multiply line 39c by 60  39d. Total. Multiply line 39c by 60  39d. Total. Multiply line 39c by 60  39d. Total is a presumption of abuse. Check the box that applies:  The line 39d is less than \$7,475°. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475°, but not more than \$12,475°. Go to line 41.	38. Add all of the allowed deductions.		
Copy line 32, All of the additional expense deductions  Copy line 37, All of the deductions for debt payment  Total deductions  \$ 7,389.31  Copy total here=> \$ 7,389.31  Copy total here=> \$ 7,389.31  Total deductions  Copy line 38, Total deductions  39a. Copy line 38, Total deductions  39b. Copy line 38, Total deductions  39c. Monthly disposable income 11 U.S.C. § 707(b)(2).  Subtract line 39b from line 39a  Total. Multiply line 39c by 60  39d. Total. Multiply line 39c by 60  39d. Total. Multiply line 39c by 60  39d. Total is a presumption of abuse. Check the box that applies:  The line 39d is more than \$1,2,475^*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475^*, but not more than \$12,475^*. Go to line 41.		o 6 621 29	
Total deductions  \$ 7,389.31 Copy total here=> \$ 7,389.31  Determine Whether There is a Presumption of Abuse  39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income \$ 7,526.39 39b. Copy line 38, Total deductions -\$ 7,389.31  39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a  For the next 60 months (5 years) x 60  39d. Total. Multiply line 39c by 60 39d. \$ 8,224.80 Copy line 39d here=> \$ 8,224.80  40. Find out whether there is a presumption of abuse. Check the box that applies:  The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.	,	<u> </u>	
Total deductions  \$ 7,389.31   Copy total here=> \$ 7,389.31    Determine Whether There is a Presumption of Abuse  39. Calculate monthly disposable income for 60 months  39a. Copy line 4, adjusted current monthly income  \$ 7,526.39  39b. Copy line 38, Total deductions  - \$ 7,389.31  39c. Monthly disposable income. 11 U.S.C. \$ 707(b)(2). Subtract line 39b from line 39a  For the next 60 months (5 years)  x 60  39d. Total. Multiply line 39c by 60  39d. Total. Multiply line 39c by 60  39d. Find out whether there is a presumption of abuse. Check the box that applies:  The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.  The line 39d is more than \$12,475*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.			
Determine Whether There is a Presumption of Abuse  39. Calculate monthly disposable income for 60 months  39a. Copy line 4, adjusted current monthly income  \$ 7,526.39  39b. Copy line 38, Total deductions  -\$ 7,389.31  39c. Monthly disposable income. 11 U.S.C. § 707(b)(2).  Subtract line 39b from line 39a  For the next 60 months (5 years)  X 60  39d. Total. Multiply line 39c by 60  39d. Total. Multiply line 39c by 60  39d. Sa,224.80  Copy line 39d here=> \$ 8,224.80  Copy line 39d here=> \$ 8,224.80  The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.  The line 39d is more than \$12,475*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.	Copy line 37, All of the deductions for debt payment	+\$63.91	
39. Calculate monthly disposable income for 60 months  39a. Copy line 4, adjusted current monthly income  \$ 7,526.39  39b. Copy line 38, Total deductions  39c. Monthly disposable income. 11 U.S.C. § 707(b)(2).  Subtract line 39b from line 39a  For the next 60 months (5 years)  29d. Total. Multiply line 39c by 60  39d. Total. Multiply line 39c by 60  39d. \$ 8,224.80  Copy line 39c here=>\$ 137.08  Copy line 39c here=>\$ \$ 8,224.80  Copy line 39d here=>  \$ 8,224.80  The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.  The line 39d is more than \$12,475*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.	Total deductions	\$ 7,389.31 Copy to	stal here=> \$
39a. Copy line 4, adjusted current monthly income  \$ 7,526.39  39b. Copy line 38, Total deductions  -\$ 7,389.31  39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a  For the next 60 months (5 years)  \$ x 60  39d. Total. Multiply line 39c by 60  39d. \$ 8,224.80  \$ 8,224.80  Copy line 39d here=> \$ 8,224.80  40. Find out whether there is a presumption of abuse. Check the box that applies:  The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.  The line 39d is more than \$12,475*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.	Part 3: Determine Whether There is a Presumption of Abuse		
39b. Copy line 38, <i>Total deductions</i> 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a  For the next 60 months (5 years)  x 60  39d. Total. Multiply line 39c by 60  39d. Find out whether there is a presumption of abuse. Check the box that applies:  The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, <i>There is no presumption of abuse</i> . You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.	39. Calculate monthly disposable income for 60 months		
39c. Monthly disposable income. 11 U.S.C. § 707(b)(2).  Subtract line 39b from line 39a  For the next 60 months (5 years)  x 60  39d. Total. Multiply line 39c by 60  39d. Find out whether there is a presumption of abuse. Check the box that applies:  The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.	39a. Copy line 4, adjusted current monthly income	\$ 7,526.39	
Subtract line 39b from line 39a  \$\frac{137.08}{39c here=>}\$ \frac{137.08}{39c here=>}\$ \frac{137.08}{	39b. Copy line 38, Total deductions	- \$ 7,389.31	
39d. Total. Multiply line 39c by 60			407.00
39d. Total. Multiply line 39c by 60 39d. \$\frac{8,224.80}{39d here=>}\$\frac{8,224.80}{39d here=>}\$\$  40. Find out whether there is a presumption of abuse. Check the box that applies:  \[ \text{The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, \textit{There is no presumption of abuse.} Go to Part 5.}  \[ \text{The line 39d is more than \$12,475*. On the top of page 1 of this form, check box 2, \textit{There is a presumption of abuse.} You may fill out Part 4 if you claim special circumstances. Go to Part 5.}  \[ \text{The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.} \]	For the next 60 months (5 years)		x 60
39d. Total. Multiply line 39c by 60 39d. \$\frac{8,224.80}{39d here=>}\$\frac{8,224.80}{39d here=>}\$\$  40. Find out whether there is a presumption of abuse. Check the box that applies:  \[ \text{The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, \textit{There is no presumption of abuse.} Go to Part 5.}  \[ \text{The line 39d is more than \$12,475*. On the top of page 1 of this form, check box 2, \textit{There is a presumption of abuse.} You may fill out Part 4 if you claim special circumstances. Go to Part 5.}  \[ \text{The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.} \]			
<ul> <li>□ The line 39d is less than \$7,475*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.</li> <li>□ The line 39d is more than \$12,475*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.</li> <li>■ The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.</li> </ul>	39d. <b>Total.</b> Multiply line 39c by 60	39d. \$ <b>8,224.80</b>	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
<ul> <li>□ The line 39d is more than \$12,475*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5.</li> <li>■ The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.</li> </ul>	40. Find out whether there is a presumption of abuse. Check the	ox that applies:	
Part 4 if you claim special circumstances. Go to Part 5.  The line 39d is at least \$7,475*, but not more than \$12,475*. Go to line 41.	☐ The line 39d is less than \$7,475*. On the top of page 1 of thi	form, check box 1, There is no pr	resumption of abuse. Go to Part 5.
*Subject to adjustment on 4/01/16, and every 3 years after that for cases filed on or after the date of adjustment.		his form, check box 2, <i>There is a p</i>	presumption of abuse. You may fill out
	Part 4 if you claim special circumstances. Go to Part 5.		presumption of abuse. You may fill out

41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you A Summary of Your Assets and Liabilities and Certain Statistical Info Schedules (Official form 6), you may refer to line 5 on that form.			122,977.96			
				X	.25			
	41h	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)	(2)(A)(i)(1)	\$	30,744.49	Сору	\$	30,744.49
	710.	Multiply line 41a by 0.25.	(2)(/ ()(1)(1)	-		here=>	•	
259	% of y	ne whether the income you have left over after subtracting all allour unsecured, nonpriority debt. e box that applies:	owed dedu	ctions	s is enough to բ	oay		
•		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check be Part 5.	ox 1, There	is no	presumption of a	abuse.		
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this amption of abuse. You may fill out Part 4 if you claim special circumst						
art 4:	Giv	re Details About Special Circumstances						
		we any special circumstances that justify additional expenses or alternative? 11 U.S.C. § $707(b)(2)(B)$ .	adjustment	s of c	urrent monthly	income	or w	hich there is n
■ No	o. Go	to Part 5.						
□ Ye		in the following information. All figures should reflect your average moth item. You may include expenses you listed in line 25.	onthly expe	ense o	r income adjustr	ment for		
	ne	u must give a detailed explanation of the special circumstances that a cessary and reasonable. You must also give your case trustee docuntustments.					<b>;</b>	
	G	ive a detailed explanation of the special circumstances			monthly expense adjustment	se		
			\$					
			\$					
			 \$					
			 \$					
	-		*					
art 5:	Sig	n Below						
	By si	gning here, I declare under penalty of perjury that the information on t	his stateme	nt and	d in any attachm	ents is tru	e an	d correct.
	χ /s/	Robert L. Beck, Jr. X /s/	Dawn L. I	Beck				
	Ro	bbert L. Beck, Jr. Da	wn L. Bed					
<b>.</b>	•	,	nature of D		2			
Dat			tober 5, 2					
	IVII	וווון טטן וווון טטן וווון טטן וווון איז IVIIV	., 00 / 11					

Debtor 1 Debtor 2 Robert L. Beck, Jr. Dawn L. Beck

Case number (if known) 15-30615

# **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 03/01/2015 to 08/31/2015.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Synergy Global Solutions

Year-to-Date Income:

Starting Year-to-Date Income: \$5,645.90 from check dated 2/28/2015. Ending Year-to-Date Income: \$43,453.61 from check dated 8/31/2015.

Income for six-month period (Ending-Starting): \$37,807.71.

Average Monthly Income: \$6,301.29 .

Debtor 1 Debtor 2 Robert L. Beck, Jr. Dawn L. Beck

Case number (if known) 15-30615

# **Current Monthly Income Details for the Debtor's Spouse**

### **Spouse Income Details:**

Income for the Period 03/01/2015 to 08/31/2015.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Aurora Health Care

Year-to-Date Income:

Starting Year-to-Date Income: \$1,750.66 from check dated 2/28/2015. Ending Year-to-Date Income: \$9,101.28 from check dated 8/31/2015.

Income for six-month period (Ending-Starting): **\$7,350.62**.

Average Monthly Income: \$1,225.10.